ENTRY FORM – LIGHT HORSE - DIVISION 5

Complete and send to: lucy@armstrongipe.com or mail to IPE Box 490 ARMSTRONG, B.C. V0E 1B0 Phone (250) 546-9406 www.armstrongipe.com

EXHIBITION DATES – August 29 – September 2, 2018 **ENTRIES CLOSE** –July 27, 2018

- Please read General Rules & Regulations in the Prize book. Exhibitor responsible for any errors on entry form.

RESPONSIBILITY CLAUSE

I certify that every horse/rider/driver is eligible as entered. I make these entries at my own risk and subject to the rules of this show and of the Equestrian Federation and I agree to be bound hereby. I further certify that I have read all the instruction in the prize list and general rules in the front of the prize list and will comply with those rules. I agree to make no claims against the show or Owners of the exhibition grounds, if any damage is occasioned to or loss occur to any equipment or animal or injury to any rider which I sent to the show. **I certify that I have read and agree to be bound by the Responsibility Clause and have read the Exhibitor regulations.**

Owner's Name _____ **Signature** _____

I, _____ **hereby consent to the entry of my children. I certify that the junior entrants are under the age of 18 years and that I have read and agree to be bound by the responsibility clause above.**

Name _____ **Birth Date** _____
childs name childs birth date

_____
(signature of parent)

EXHIBITORS NAME_____ REGISTERED OWNER _____

MAILING ADDRESS_____CITY_____PROV_____

POSTAL CODE_____ PHONE_____ EMAIL _____DATE_____

Show	Driver's/ Riders Name	Horse's Name	Height	D.O.B./ Age	Sex	Registration #	Classes							Fees

All Exhibitors must be current I.P.E. members or purchase an Exhibitor Ticket

Number of Passes required:

ADULT/ STUDENT - $21.40 Exhibitor Fee ☐

CHILD (6-12) $5.35 Exhibitor Fee ☐

(5 & under Free)

Is this horse being ridden by another Exhibitor

Name of other rider/s _____

Number of horses _____

STALL REQUIRED FOR: Wed ___ Thurs___ Fri___ Sat___ Sun___

CAMPING/PARKING PASS - limited to two (2) vehicles per exhibitor:
Please fill out CAMPING/PARKING form in The Prize Book

HCBC Number _____

Prize Cheque Payable to: Please circle one

Owner or Exhibitor

Super Horse Entry: Fee $25.00 ☐

Team Challenge: NO FEE ☐

Date Received ☐

Receipt Number ☐

Stall Deposit Cheque # ☐

Exhibitor Number ☐

Entry Fees _____

Exhibitor Fees _____

Camping ($10 per night) _____

Parking Fee ($8 per day) _____

Stall Fees _____

TOTAL $ ☐

VISA ☐ MASTERCARD ☐

Card Number: _____

Expiry: _____ CVC # _____

Signature: _____